

| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | <i>0151900</i> |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

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| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| — (Through numeral) | Canceled | A | Appeal |
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If more than 150 claims or 10 actions
staple additional sheet here

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